

www.asiaohio.org

August 4, 2016

Sylvia Matthews Burwell U.S. Secretary Health & Human Services 200 Independence Avenue S.W. Washington, D.C. 20201

Re: Healthy Ohio Program 1115 Demonstration Waiver

Dear Secretary Burwell,

We oppose the proposed Healthy Ohio 1115 Medicaid Waiver in its entirety because it will disrupt coverage and increase cost. We believe this waiver will replace an already working system with a complex system that will decrease and weaken overall health coverage of low-income individuals and hurt health outcomes for some of our state's most vulnerable populations.

Cleveland Office

3631 Perkins Ave.

P: 216-881-0330

F: 216-881-6920

Cleveland, OH 44114

Ste. 2A-W

Akron Office

730 Carroll Street

Akron, OH 44304

P: 330-535-3263 F: 330-535-3338

More than 2.9 million Ohioans, or 25 percent of the state's population, are enrolled in Medicaid. Thanks to Ohio implementing Medicaid Expansion in 2014, more than 640,000 Ohioans now have health coverage that did not beforehand. The waiver would create the following changes for over 1 million of Ohio's Medicaid population¹:

- Charge enrollees unaffordable premiums. Premiums have led to declines in enrollment in other states, such as Oregon who experienced a 77% drop in enrollment after premiums were instituted.²
- Medicaid enrollees can have their coverage terminated for non-payment of premiums.
- Institute health savings accounts and debit cards which will be costly to administer and make it more
 complex for people to use Medicaid. Arkansas recently eliminated the imposition of health savings
 accounts and cost-sharing requirements on participants below 100% of the FPL due to high administrative
 costs.³
- The waiver proposes annual and lifetime caps which were ended as a result of the Affordable Care Act. Medicaid recipients should not be subject to caps which are now illegal.

¹Ohio Department of Medicaid Managed Care eligibility and Enrollment Reports, Website http://medicaid.ohio.gov/RESOURCES/ReportsandResearch/MedicaidManagedCarePlanEnrollmentReports.aspx and Center for Community Solutions *Ohio's Pending Healthy Ohio 1115 Medicaid Waiver* (1/26/16) *Webinar*

² Center for Community Solutions *Ohio's Pending Healthy Ohio 1115 Medicaid Waiver (1/26/16) Webinar*

³ Center for Community Solutions Ohio's Pending Healthy Ohio 1115 Medicaid Waiver (1/26/16) Webinar

⁴Ngo-Metzger, Quyen, Joseph Telfai, Dara H. Sorkin, Beverly Weidmer, Robert Weech-Maldonado, Margarita Hurtado, and Ron D. Hays. "CULTURAL COMPETENCY AND QUALITY OF CARE: OBTAINING THE PATIENT'S PERSPECTIVE." *Cultural Competency and Quality of Care: Obtaining the Patient's Perspective*, October 2006, 1-40.

⁵"Fact Sheets." American College of Emergency Physicians. http://newsroom.acep.org/fact-sheets?item=30032



www.asiaohio.org

Akron Office

730 Carroll Street Akron, OH 44304 P: 330-535-3263

F: 330-535-3338

Cleveland Office

3631 Perkins Ave. Ste. 2A-W Cleveland, OH 44114

P: 216-881-0330 F: 216-881-6920

At Asian Services In Action, Inc., our mission is to empower and advocate for Asian Americans/ Pacific Islanders (AAPIs); and to provide AAPIs and other communities access to quality, culturally, and linguistically appropriate information, health and social services. Our vision is that AAPI individuals, families and communities will progress further along the path towards self-sufficiency; be deeply engaged in civic life; have equal access to opportunities; be well understood by the vast availability of community data and information; and achieve optimal health and well-being. We are located in Northeast Ohio, and our services impact not only the Northeast Ohio region, but all of Ohio.

As providers to the AAPI community and all communities, the waiver would not only negatively impact Ohio's Medicaid population, but would also have negative repercussions to Limited English Speaking communities. Specifically, the implications of the waiver includes:

- **Difficulty to Maintain Health Coverage** The waiver proposes Medicaid to require monthly premium copayments and health saving accounts. With the lack of resources for culturally and linguistically appropriate services and lines of communication, these changes will be key barriers for Limited English Proficient Medicaid recipients to maintain health coverage. If these community members lose coverage, they will be locked out until they pay their premiums, which will result in an indefinite loss of coverage if this is not explained in a linguistically appropriate manner. This domino effect will ultimately leave community members to be discriminated by this system.
- Inconsistency In Primary Care Provider A lack of coverage will result in vulnerable communities utilizing Emergency Rooms, leading to inconsistent primary care providers. This results in a hesitancy to trust providers and violates ones' right to equitable health care. Limited English speaking community members who are newer to our country's health care system are apprehensive to receive care, but if they are able to have a Primary Care Provider who they learn to trust over time, they become more comfortable with accessing care, providing information, and asking questions, usually resulting in better health outcomes. ⁴ Looking at the cost of hospitals and Emergency Room physicians, more than one-third of emergency physicians lose an average of \$138,300 each year as a result of uncompensated care—hurting the overall quality of Emergency Room care for everyone. ⁵

Overall, we do not support the Healthy Ohio waiver and ask for reconsideration as it will create barriers to access to care for more than 1 million Medicaid eligible Ohioans.

Respectfully,

Michael Byun Executive Director